

F140000000170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

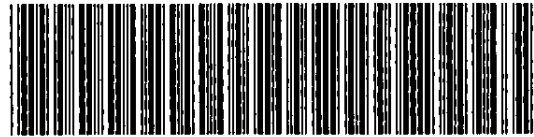
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRUSTED ADVISORS TO NONPROFITS

SALLY R. WAGENMAKER
RYAN K. OBERLY
PAUL Z. WINTERS

January 6, 2014

53 W. JACKSON BLVD.
SUITE 550
CHICAGO, IL 60604

T: (312) 626-1600
F: (312) 626-1610

WAGENMAKERLAW.COM

Via Federal Express

Florida Department of State
Division of Corporations
New Filing Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: Registration of Foreign Not-for-Profit Corporation;
Cross Wounds Foundation**

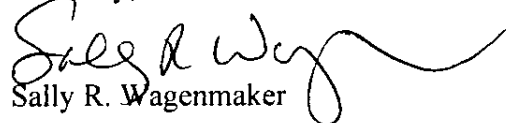
Dear Department of State Representative:

Enclosed are my client Cross Wounds Foundation's foreign registration documents, as follows:

1. Cover letter (on prescribed form);
2. Application by foreign not for profit corporation;
3. Check #1292 for the \$70 filing fee; and
4. Certificate of good standing for corporation's home state of Illinois.

Please contact me if you have any questions or need further information regarding this matter.

Sincerely,



Sally R. Wagenmaker

cc: Mr. Taylor Schenone (via email, w/ encl.)

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Cross Wounds Foundation, NFP Corp.

Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Sally Wagenmaker

Name of Person

Wagenmaker & Oberly, LLC

Firm/Company

53 W. Jackson Blvd.

Suite 550

Address

Chicago, IL 60604

City/State and Zip Code

Sally@wagenmakerlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sally Wagenmaker

312

626-1600

at ()

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

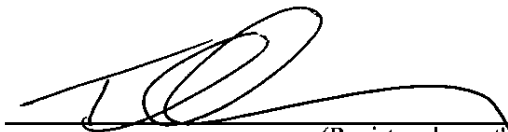
**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. Cross Wounds Foundation, Corp.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. IL 3. 46-2897903
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 05/28/13 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. N/A
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 11308 Pond Cypress St.
(Principal office address)
- Ft. Myers, FL 33913
(Current mailing address)
8. Religious
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)
- Name: Taylor Schenone
- Office Address: 11308 Pond Cypress St.
- Ft. Myers, Florida 33913
(City) (Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: Taylor Schenone
Address: 2600 Ginger Woods Dr.
Aurora, IL 60502

Vice Chairman: _____
Address: _____

Director: Ken Breece
Address: 2S307 Center Ave.
Wheaton, IL 60189

Director: Bill Moore
Address: 371 South Walnut Ridge Court
Frankfort, IL 60423

B. OFFICERS

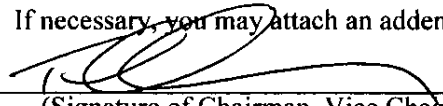
President: Taylor Schenone
Address: 2600 Ginger Woods Dr.
Aurora, IL 60502

Vice President: Bill Moore
Address: 371 South Walnut Ridge Court
Frankfort, IL 60423

Secretary: Ken Breece
Address: 2S307 Center Ave., Wheaton, IL 60189

Treasurer: Ken Breece
Address: 2S307 Center Ave., Wheaton, IL 60189

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Taylor Schenone
(Typed or printed name and capacity of person signing application)

File Number 6901-094-6



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

CROSS WOUNDS FOUNDATION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MAY 28, 2013, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 6TH day of JANUARY A.D. 2014 .

Jesse White

Authentication #: 1400600640

Authenticate at: <http://www.cyberdriveillinois.com>

SECRETARY OF STATE